

BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	COMPOSITION ANI	METHOD FOR THE	TREATMENT OF WATER	RELATED EAR DISORDERS					
Fill in Appropriate	the specification of which is attached hereto. If not attached hereto, the application is identified by the attorney docket number as set forth above and/or the following:								
Information -					as				
For Use Without			(if applicable) and (or						
Specification Attached:	and amended o	п	Y 2004		(if applicable) and/or as PCT				
	the specification	n was nied on 2702 polication Number	PCT/ZA2004/000074		; and was				
	amended on				(if applicable)				
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof.								
	I do not know or patented or descripplication, that the invention has not b foreign to the Unite months for designs) country foreign to the I hereby claim inventor's certificate	ibed in any printed same was not in puble en patented or mad d States of America prior to this applicate e United States of America	publication in any counts ic use or on sale in the Un le the subject of an invei on an application filed b ion, and that no application icrica prior to this applica its under Title 35, United e also identified below ar	rused in the United States of America be ry before my or our invention thereof or ited States of America more than one yea ator's certificate issued before the date of y me or my legal representative or assign on for patent or inventor's certificate on the tion by me or my legal representatives or States Code, §119(a)-(d) of any foreign all y foreign application for patent or invention.	ir prior to this application, that the of this application in any country gris more than twelve months (such is invention has been filed in any assigns, except as follows.				
Insert Priority	Prior Foreign Applic	ation(s)	•	07/02/2003					
Information:	2003/5160	SOUTH AF	RICA		X				
(if appropriate)	(Number)	(Country)	•	(Month/Day/Year Filed)	ies No				
	(Number)	(Country)		(Month/Day/Year Filed)	Yes No				
	(Number)	(Country)		(Month/Day/Year Filed)	Yes No				
	(Number)	(Country)		(Month/Day/Year Filed)	Yes No				
	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below.								
Incort Provisional									
Insert Provisional Application(s): (if any)	(Application Num	ber)		(Filing Date)					
	(Application Number)			(Filing Date)					
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:								
Insert Requested Information: (if appropriate)	Country		Application Number	Date of Filing (Mont	h/Day/Year)				
	I hereby claim the benefit under Title 35, United States Code, §1 20 of any United States and/or PCT application(s), including for continuation in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior Unite States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the dut to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.								
Insert Prior U.S. Application(s): (if any)	(Application Numb	er)	(Filing Date)	(Status - patented, po	ending, abandoned)				
Page 1 of 4 (Rev. 11/2005)	(Application Numb	er)	(Filing Date)	(Status - patented, pe	ending, abandoned)				

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

CUSTOMER NO. 02292 (BIRCH, STEWART, KOLASCH & BIRCH, LLP)

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

ill Name of First or Sole Inventor.	GIVEN NAME/FAMILY NAME	INVENTORSSIGNATURE		DATE*				
all Name of First or Sole Inventor: sert Name of Inventor → sert Date This Document is Signed	PETER TUNGUY-DESMARAIS	far.		ત્રે4.02. 2006.				
sert Residence sert Citizenship →	Residence (City, State & Country) SOUTH AFRICA	SOUTH AFRICA						
sum Post Office ddress →	MAILING ADDRESS (Complete Street Address including City, State & Country)							
	58 STIRLING CRESCENT, DURBAN NORTH, KWAZULU-NATAL, 405 I, SOUTH AFRICA							
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	Residence (City, State & Country)		CITIZENSHI	P				
	MAILING ADDRESS (Complete Street Address including City, State & Country)							
ill Name of Third Inventor, if any, see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
	Residence (City, State & Country)		CITIZENSHI	P				
	MAILING ADDRESS (Complete Street Address including City, State & Country)							
ull Name of Fourth inventor, if any. sec above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
	Residence (City, State & Country)		CITIZENSHI	P				
	MAILING ADDRESS (Complete Street Address including City, State & Country)							
ull Name of Fith Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
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*DATE OF SIGNATURE